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MONTHLY ENVIRONMENTAL COMPLIANCE REPORT

FOR THE REPORTING PERIOD
APRIL 16, 1993 THROUGH MAY 15, 1993

REPORT DATE: JUNE 5, 1993

EG&G ROCKY FLATS, INC.
STANDARDS, AUDITS, AND ASSURANCE ORGANIZATION
ENVIRONMENTAL STANDARDS ANALYSIS

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REVIEWED FOR ISSUES ONLY
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ADMIN RECORD

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June 5, 1993*

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MONTHLY ENVIRONMENTAL COMPLIANCE REPORT

1. INTRODUCTION

The Monthly Environmental Compliance Report (Report) is a deliverable under the EG&G Rocky Flats, Inc (EG&G) Environmental Compliance Program (ECP) and is prepared by the Standards, Audits, and Assurance (SAA) Environmental Standards Analysis (ESA) group. This Report covers the period from April 16, 1993 to May 15, 1993. Improvements in format and content continue based on suggestions from reviewers and electronic reporting media updates.

The data in this Report is primarily based on data contained within the Plant Action Tracking System (PATS). This Report is not meant to detail all environmental deficiencies contained in PATS, but rather to discuss highlights and trends of environmental deficiencies as well as successes. Also included is information provided from a myriad of plant representatives whose information may be more current than data generated for this Report from PATS. This document is not intended to represent a complete picture of environmental compliance, but rather provides up-to-date information for internal review and planning. The Report is reviewed for accuracy and completeness prior to each month's publication by appropriate program managers.

The scope of this Report covers major environmental compliance issues at both the Rocky Flats Plant (RFP) and the Oxnard facility. This Report presents a summary and status of the various environmental compliance items researched for the period covering April 16, 1993 through May 15, 1993.

HIGHLIGHTS.

- On March 1, 1993 DOE Headquarter's Environmental Management (EM) approved RFP as a Hanford generator of low-level and mixed waste. On May 21, 1993 EM rescinded this approval. In order to reinstate approval, EM requested additional information from DOE, RFO which is currently under preparation.
- On June 14, 1993 EG&G work packages were due to DOE, RFO for review.
- RFP is preparing for the Nevada Test Site (NTS) to audit the RFP Waste Generator's Program (NVO-325) for low-level waste, the audit is to be conducted during August 23 through 27, 1993.
- A NTS site review of the RFP Low-Level Waste Management Program was conducted on April 20-22, 1993. Feedback provided by NTS during the closeout meeting was very positive and no major concerns or issues were identified.

- More than 285 tons of scrap and 14 flatbed trucks of excess material have been removed from the old PU&D yard and the Building 964 laydown area. All excess materials have been removed from the PU&D north yard and the yard has been turned over to EM for assessment of spills and releases
- Fingerprinting, consolidating, sampling, analysis, characterization, and disposition of more than 300 drums of "unknown" wastes were completed on May 28, 1993.
- The Air Quality Division has completed a sitewide refrigerant equipment inventory resulting in a compilation of information for about 1,700 units
- RFP's silver recovered in Building 774 that was suspected of being rad-contaminated has been cleared and declared non-rad. The silver has been quarantined in inventory for several years, due to the offsite waste shipping moratorium, which has created a potential RCRA compliance problem because of the recycling rules. EG&G recently completed a rad evaluation of all the sites that generated the recycled photo-fixer solution and found them to be non-rad generators. The Building 774 silver recovery operation can resume operations, the recovered silver can be sold on the open market, and there is no longer a potential issue relative to RCRA compliance. Building 774 operations expects to begin silver recovery on or about July 16, 1993.
- Environmental Restoration Management (ERM) has gained verbal approval from Colorado Department of Health (CDH) to change the requirements from Real Time Radiography (RTR) for all "grey drums" generated in the field during remediation activities. In the past, all grey drums have been transferred to Building 664 for RTR examination for free liquids. CDH agrees that personnel responsible for filling grey drums on location should be responsible for verifying the presence or lack of free liquids since the material being drummed is basically dirt. A document change notice has been issued for the interim, and practices have already been promulgated. Meanwhile, a Standard Operating Procedure has been drafted and is expected to be submitted to RFO during the week of June 21, 1993.
- The 1991 lawsuit brought by CDH against DOE regarding failure to properly manage residues, was dismissed on June 22, 1993. As part of the settlement, a new Residue Compliance Order between DOE, EG&G and CDH was signed on April 23, 1993 and, after receiving no substantive public comment within the requisite 30 days, the Order became effective on June 17, 1993. The Order requires implementation of the approved Mixed Residue Reduction Program.

2 TASK FORCE ON ENVIRONMENTAL COMPLIANCE

2.1 Summary: The Environmental Compliance Task Force (Task Force) was established subsequent to the effective resolution of the Ten-Point Action Plan by the Joint Environmental

Compliance Operating Committee (JECOC) The committee is made up of top-level management within EG&G and DOE, RFO utilizing technical advisors from each major organization The major objective is to assure that a viable ECP has been established at the RFP The committee is chaired by the E&WM Associate General Manager, T A Hedahl.

2 2 Environmental Data in PATS A presentation was given to the Task Force on SAA's Self-Evaluation Program and the recent changes to its implementing procedure (1-11000-ADM-16 10) Changes made in April focus on instructions for entering information into PATS While this procedure is a Level 1 procedure that does not focus on environmental issues, it will impact environmental data in PATS and should be consistent with all other plans and procedures dealing with environmental compliance

It became obvious during the presentation that the major issues and problems with the overall RFP Corrective Action Program remain unresolved During the presentation questions were raised regarding lack of clear definitions and concerns with the overall process of evaluation (identification of an environmental non-compliance) through corrective action, specifically as it relates to PATS Another procedure, Environmental Compliance Program Deficiency Response/Reporting Procedure, drafted by ESA and reported on last month which deals specifically with environmental data in PATS, is being finalized within E&WM E&WM personnel have taken ownership for finalizing this procedure and for ensuring that it is fully implemented so that many of the problems that were discussed during this presentation can be eliminated There are approximately 15 different procedures/programs that affect, or will be affected with the implementation of the new procedure All documents should be reviewed for consistency No action has been assigned to do so at this time, in part, due to the scattered ownership of the parts of the Corrective Action Program RFO management expressed concern that the deficiencies with the corrective action program, including PATS, remains deficient

Note DOE, RFO had conducted a surveillance on EG&G's corrective action program specific to environmental non-compliances at the RFP In both this Surveillance and the Self-Evaluation presentation discussed above, the topic of concern is exactly the same - i.e getting environmental data into PATS DOE, RFO wrote its interim surveillance report in late April RFO reviewed 22 documents which were mostly procedures/programs that deal with, at least in part, the environmental corrective action program One of those 22 documents was the Self-Evaluation Program Nine findings were discussed which, when summarized, indicated that serious deficiencies still existed in both the current program and with current plans to improve the corrective action program The fact that there are so many requirements in so many documents which have to be adhered to lead to the finding that "PATS remains unwieldy, complicated for users, and not fully functional" RFO reports that "No one sitewide corrective action program is fully matured and proven to be effective, the procedures and components in place or proposed are not integrated, but conflict , and responsibility for resolution of the problem is diffused throughout the management and organizational structure "

The RFO surveillance report has not yet been officially transmitted to EG&G, however, RFO's Waste Operations Branch reports that it plans to recommend submittal and is moving forward with issuance A resolution to the broad issue of gaining control of the myriad of

responsibilities and programs that affect PATS environmental data has not been assigned, but will likely be assigned upon receipt of RFO's surveillance report

2 3 Progress on the Development of this Report: It was reported last month that this Report was transitioning based on a number of milestones. One of the major milestones was the completion of a draft procedure, instructions, input form, etc. that would, when fully implemented, do a number of things to improve environmental data in PATS. The Environmental Compliance Program Deficiency Response/Reporting Procedure (discussed above) provides a straight-forward, uniform method for reporting environmental data. It explains who, what, when, where and how to get environmental data into PATS. It provides a new, simple input form with detailed instructions for filling in the blanks. The draft procedure was presented to the Task Force and assigned to E&WM for finalization into a Level 1 procedure and implementation. Implementation will include a "scrubbing" of current environmental data contained in PATS to add fields of information needed to fully sort the data and produce periodic reports which will be included in this report as soon as they are available.

A schedule for when the procedure will be fully implemented, plantwide was requested by RFO. E&WM will prepare the schedule. The building Environmental Coordinators (EC's) and Environmental Program Managers (EPM's) have been established and their organization instituted such that there are approximately 11 EPMs who represent all areas of the plant. This group represents the most logical set of people to provide input on a monthly basis to this Report. During the EPM's weekly meeting on July 6, 1993, ESA will present report needs to EPMs. EPMs should be responsible for providing information regarding all inspections, findings and actions taken or to be taken relative to those findings, major environmental compliance issues and anticipated resolutions, major environmental compliance actions taken, and any other compliance information appropriate for this report. This way data reported will be first hand and not subject to interpretation. ESA will work closely with EPMs to effect a smooth phase-in to quality reporting that provides top-level management with complete and timely information about compliance activities at RFP.

Additionally, ESA is working with tracking and trending statisticians to develop useful performance indicators that will be included in this report in the form of charts and graphs. The charts and graphs will represent the new environmental data that will be available from PATS when the E&WM procedure described above is fully adopted. When examined over time, these charts and graphs will provide obvious trends that will lead to improvements in compliance activities.

Based on the above improvements that will take place during the next few months, this report will continue to change and improve. Sections 7 and 9 will be eliminated as building reports improve and provide the same type of information. During the transition, the hand-generated tables have been eliminated from this report in favor of tables currently being produced for the Task Force. New tables will be incorporated as mentioned above when the data are available from PATS.

3 TEN-POINT ACTION PLAN RESPONSE

3.1 Summary. DOE's Ten-Point Action Plan was translated into 18 EG&G action plans to be implemented by various EG&G organizations. Those action plans were submitted to DOE, RFO for comment.

There are four action plans remaining open including 4, 11 and 16 (combined), 13 and 14. Action Plan 4 deals with RCRA performance based training which is ongoing.

Action Plan 11a and 16a, which were combined and revised, is in various stages of completion. It deals with the whole issue of PATS and its environmental data. Actions included several tasks associated with a procedure for entering environmental data into PATS. That procedure has been drafted as discussed in Sections 2.2 and 2.3 above and includes requirements for input and tracking of environmental data in both Commitments tracking (formal PATS) and Expedited Data Entry (EDE) or the departmental PATS. The draft procedure is being used/tested by the pilot project buildings and any deficiencies in the procedure will be communicated to E&WM which has taken responsibility for full finalization and implementation of the procedure.

Remaining tasks deal with the evaluation of environmental data contained within PATS and the acceptability of that data given the many improvements implemented. The evaluation will follow implementation of the procedure by 2 to 3 months to allow time for the process to be useful.

Action Plan 13 deals with the assessment of hazardous waste tanks and auxiliary systems. Action Plan 14 deals with improvements to the RCRA Contingency Plan Implementation reporting process. All short-term tasks have been completed, the single long-term task is due next month but is expected to be delayed. Remaining is the revision to Section 4.0 of the Hazardous Waste Requirements Manual. The Procedural Change Notice has been issued, but the final revision to Section 4.0 must now undergo new formatting pursuant to the new Policy & Procedure Guidelines (PPG). These guidelines have been recently implemented such that an unanticipated delay will occur with the final revision of 4.0. Currently, the action plan manager is seeking approval for a delay in this task due date. Any change in the due dates will be reflected in PATS.

4. JUNE 1992 COLORADO DEPARTMENT OF HEALTH NOTICE OF VIOLATION

4.1 Summary. EG&G received a Notice of Violation (NOV) with 56 alleged violations from the CDH in June of 1992. There were two other NOV's dated March 28, 1990, and May 22, 1990 respectively. EG&G disputes the legal and factual basis of many of the allegations. However, for the purpose of this Report, all factual allegations are assumed to be correct as written. One hundred forty-eight tasks have been identified that address issues raised in the June of 1992 NOV.

This Report has continued to update completion information regarding tasks that were linked with the NOV. The NOV tasks were tracked separately by E&WM during the first 5 months following receipt of the NOV. Nearly all of the tasks were closed during the first 5 months and

tracking by E&WM was eliminated. At that point, checking on the few remaining items open was the only tracking performed. Because these tasks are not separately tracked in PATS, verification information was not available. This led to incorrect reporting of completion. Incorrectly reported were the completion of tasks associated with both the secondary containment of the Building 732 tanks and the assessment of ancillary equipment in Building 371. The issue regarding the repair of secondary containment became moot when it was determined that the waste associated with laundry operations in Building 732 were not hazardous. Thus, secondary containment is not required. The assessment of ancillary equipment in Building 371 had not been satisfactorily performed and the issue reopened (this has not been reported previously). These assessments are currently ongoing and the task has not been closed.

The other tasks remaining open include 6 RCRA training tasks to be completed by June 15, 1993 and an ongoing commitment to implement the contingency plan in the future for emergency transfers to Building 374.

5. ENVIRONMENTAL SELF-ASSESSMENT (PILOT BUILDINGS 460 AND 559)

5.1 Summary: The Hazardous Waste Compliance Program Plan (Plan) currently being drafted by E&WM, is patterned after the successes of the Pilot Program, thus implementing lessons learned. The Plan will be implemented sitewide. The draft was due to CDH on June 15, 1993, and the final is due to CDH on August 16, 1993.

Also the environmental structure incorporating both Environmental Coordinators (ECs) and EPMs at the building level has been implemented and presented to CDH. This grassroots program begins in the buildings and provides employees direct communication regarding the environmental requirements and their applicability to their specific operations. The following is taken from an H. P. Mann letter dated May 10, 1993 to A. H. Pauole, DOE, RFO.

Based on the fundamental philosophy that environmental compliance is the responsibility of the line organizations, whether the performing organization has a direct reporting relationship within Facilities Management and Operations (FM&O), a tenant relationship or a support organization relationship, the following organization structure has been established. The EC will report directly to the Operations Managers, Unit Managers, or Facilities Managers. The primary role of the EC will be to interface with the line organization (regardless of which Associate General Manager [AGM] they report to) within a given facility and to provide direction and assistance on all environmental issues within the facility to achieve compliance. The Operations Manager, Unit Manager or Facility Manager, has the overall responsibility for compliance, and the authority to direct all necessary environmental compliance activities, through the EC and the line organization.

Whenever issues arise that cannot be solved at the working level, then direction is requested through the Environmental Program Manager. The EPM will report to a Director level position. Their primary role is to act as the primary liaison between the line organization, DOE/RFO, and EG&G E&WM and other organizations in providing

problem resolution and programmatic guidance as directed by those organizations. The EPM will provide program, project, and administrative support and will manage the environmental budgets for their area operations and accompany regulators during inspections.

With this organization structure, responsibility, authority, and expertise reside within the line organization and promotes day-to-day communication at the working level to achieve compliance. These positions will be filled with qualified people with education or pertinent experience to perform their job responsibilities.

ENVIRONMENTAL COORDINATOR JOB RESPONSIBILITIES

- 1 Single points of contact for all environmental compliance issues within their designated buildings
- 2 Advise Operations/Facility Manager in all areas of environmental compliance, surveillances, and audits
- 3 Recommends to the Shift Manager or Operations Manager to shut down an operation within their designated buildings when the operation is not in compliance with applicable environmental requirements
4. Arranges area inspections for Regulatory (Colorado Department of Health [CDH], Environmental Protection Agency [EPA]), DOE, and EG&G organizations, completes appropriate pre and post status requirements
5. Assure building specific "Floor Level" environmental compliance procedures (Level 4) are accurate and include all facility specific environmental information. Ensures Building Book requirements are current, maintained, and accurate. He/she shall cover the information at the periodic meetings to maintain awareness.
- 6 Become familiar with and communicate, as necessary, information concerning Contingency Agreements, Compliance Orders, Federal Facility Compliance Agreements, CAA, CWA, TSCA, RCRA, NEPA, NESHAP, SARA, CERCLA, FIFRA, and OSHA laws as applicable to specific assigned building
- 7 Assist in identifying and promoting waste minimization and pollution prevention measures
- 8 Conduct area specific review of training guidelines, i.e., waste generator, RCRA Custodian concerning qualification guides
- 9 Ensures Environmental Self-Evaluations are conducted, and through internal surveillances, identifies and facilitates corrective actions (COOP-002)

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- 10 Develop weekly reports on all environmental compliance issues to Environmental Program Manager
 - 11 Identifies corrective measures and prepares environmental compliance Action Plans
 - 12 Directs and Oversees closure of RCRA Units
 - 13 Ensures proper handling of all regulated waste by periodic observation of handling and inspection of travelers

**ENVIRONMENTAL PROGRAM MANAGER
JOB RESPONSIBILITIES**

- 1 Acts as the primary liaison between the Regulators, DOE, Director, Environmental Restoration (ER), Environmental Waste Management (EWM), Legal, and other Facility Management and Operations (FM&O) the Environmental Programs departments
- 2 Provides general and specific environmental technical guidance to Management
- 3 Shut down authority of an operation within their area when the operation is not in compliance with applicable environmental requirements
- 4 Prepares and submits quarterly status reports to management
- 5 Support Environmental Coordinators in their duties to achieve and maintain compliance with all applicable environmental requirements.
- 6 Manage Environmental Management budget work packages
- 7 Integrates with the FM&O Environmental Programs and other organizations on the implementation of applicable environmental requirements
- 8 Review relevant project/program, engineering, and procedure documentation for environmental implications
- 9 Requests and organizes collection of data for environmental reports and permit applications
- 10 Responds to regulatory, Department of Energy (DOE), and company inspections, appraisals, and audits related to the assigned facilities
- 11 Leads regulatory, DOE, and EG&G environmental inspectors and auditors on tours and inspections and provides required information/documents

12. Ensures area or building specific Level 4 Environmental Compliance Procedures are developed and implemented
- 13 Ensures area Environmental Self-Evaluations are conducted and conducts/coordinates internal surveillances, and coordinates deficiency tracking and finding resolution
- 14 Provide technical input for environmental occurrences
- 15 Board member for qualification of Environmental Coordinators
- 16 Reviews trends to identify potential conditions adverse to effective environmental "Multi Media" compliance practices
- 17 Reviews and approves environmental compliance Action Plans
- 18 Performs investigations or inquires of identified concerns, deficiencies, or weaknesses
- 19 Collects data for environmental reports and permit applications

5.2 Other Building Reports: The following is a discussion about building-specific issues. This section provides an avenue in which Building Operations Managers may include environmental compliance information relative to their respective buildings. Building-specific information is taken from reports submitted to ESA.

Facility Operations Areas I and II. On May 7, 1993, Facility Operations Environmental Programs initiated a DOE Reportable Occurrence for a RCRA deficiency after discovering that 5 RCRA regulated excess chemicals in the Building 111 Print Shop were not properly stored. Waste Programs notified the Print Shop that these 5 chemicals were considered waste based on age and condition. With the assistance of Facility Operations, actions required to dispose of the excess chemicals were decided upon and an action plan is under development.

A gasoline leak was discovered on May 4, 1993 near Building 331. The leak was occurring at a pipe union which is housed in a below ground level pit just above the underground gasoline storage tank. The leaking gasoline had saturated the earth in the bottom of the pit. Facility Operations initiated immediate shutdown of the tank system and immediate repairs to the pipe union (and filed the appropriate occurrence report). Attempts were made to excavate the petroleum saturated soil from the bottom of the pit but the saturation plume appeared large enough that a major excavation effort will be required. Facility Operations is preparing a "B" level Integrated Work Control Package.

Facility Operations Environmental Programs, along with Facility Operations Support, conducted a surveillance of the Windsite area to identify environmental concerns on April 26, 1993. During the inspection a black drum, located in the mechanical room of Building 251, was found.

without proper labeling. The drum was marked with the word antifreeze. Action is under way to sample the contents and to verify that it is antifreeze. The group also noticed 2 cargo containers south of Building 251, which contained acid batteries used for the computer system in Building 251. These batteries appeared to have overflowed onto the cargo container floor. This was reported to the Spill Response Engineer in Waste Regulatory Programs. Action is under way to clean up the spill residue. A poly bottle labeled sulfuric acid was found stored in the pump building. Action is underway to sample and verify the contents.

A May 5, 1993 self-evaluation of the Building 334 cargo containers revealed 4 black and white mislabeled drums. The labels indicated empty drums, but they, in fact, contained liquid suspected to be rainwater. A sample was taken, the results of which verified the liquid as non-hazardous. The liquid was pumped from the discovered drums to gray drums whose destination will be the evaporator as a conservative measure. This issue was discovered and resolved within 72 hours.

Work associated with the deletion of satellite accumulation area #1716 in Building 750 and interim certification has been completed.

The contents of the T452B flammable storage cabinet, which has been discussed in previous Reports, were all dispositioned according to characterization results for proper disposal. By May 12, 1993 the empty flammable storage cabinet was shipped to the PU&D scrap yard. All actions associated with this issue have been satisfactorily closed.

Liquid Waste Operations. Due to expiration of the Federal Facility Compliance Agreement on May 10, 1993, operations generating Land Disposal Restricted wastes have been suspended, excluding processes required to maintain the safety envelope, Health and Safety, or Environmental Compliance.

400 Area Operations. Satellite accumulation areas deemed inappropriate as a result of the April 28, 1993 CDH inspection are currently being examined for either potential deletion from use or transition into 90 day accumulation areas established near the point of generation.

No other area/building reports were received for inclusion into this report.

6 COLORADO DEPARTMENT OF HEALTH INSPECTIONS

6.1 Summary. Seven inspections were conducted and reports submitted by the CDH during this reporting period. The following is a summary of each CDH report.

Building 444. On April 28, 1993, CDH enforcement inspectors toured Building 444 during which two administrative issues arose. One inspector was not cleared and was, therefore, subjected to blindfolding to protect sensitive information. Another inspector was not adequately prepared for proper Personal Protective Equipment required for entry into Building 447. Satellite accumulation areas were questioned (see Section 2, Building Reports for the 400 area).

Property Utilization and Disposal (PU&D), 964 Lay Down Yard, and Building 371 Mixed Residue Areas. On April 29, 1993, CDH enforcement inspectors and permit writers inspected several of the cargo containers and the RCRA 90-day accumulation area in the PU&D north yard. One of the CDH inspectors expressed a concern about characterizing soil contaminated with diesel fuel and hydraulic oil as hazardous. Area management explained that the soil had been labeled as hazardous waste, placed in the 90-day area pending analysis, and would be managed in accordance with verified analytical results.

The CDH inspectors discussed and reviewed previously requested action plans for decontamination and management of three water tanker trucks in the yard with PU&D management personnel. The CDH inspectors stated that the soil being managed as hazardous waste was the only issue identified at the PU&D north yard and PU&D management did not need to attend the exit briefing.

The CDH personnel (one representing on behalf of the Interagency Agreement and on representing Permitting) asked if the scrap materials stored in OU 10 and associated Individual Hazardous Substance Sites will be removed to allow sampling for the remedial investigation to start. Facility Operations personnel stated that the materials are being removed. The CDH inspectors observed drums stored near Building 965 and in the adjacent cargo container. Inspectors commented that of approximately 40 drums in the area none were labeled, and several of the drums in the cargo container which were covered with plastic did not have lids. The inspectors also asked questions about the characterization of the drums in the area. Facility Operations explained that the drums have been fingerprinted and still require full analytical characterization, which has been scheduled. The drums will be labeled when the results are verified. Facility Operations personnel also stated that the drums in the cargo container were believed to be empty. However, when the lids were cut off to dispose of the drums, liquid and sludge were discovered. The plastic was placed on the drums to avoid collection of rainwater prior to placing the drums into the cargo container.

The CDH inspectors indicated that a problem exists regarding lack of characterization for materials in the 964 Lay Down Yard. The CDH inspectors stated that they will request a copy of the 964 Lay Down Yard waste characterization action plan if it has not been previously requested.

Inspectors observed the Protected Area Remedial Action Decontamination Pad (Pad). The CDH inspectors expressed a concern over the regulatory status of the Pad. They stated that they were not aware that the Pad was operable. RCRA Regulatory Programs personnel explained that the Pad and its operating requirements are identified in the IAG OU 4 Work Plan.

Building 371 Radiation Protection personnel, following applicable plant procedures and rules, had to deny entry into the Radiation Control Area (RCA) to three of the inspectors. These individuals use North respirators which have been banned from use at RFP. This information had not been provided to the CDH inspectors. The inspectors have been allowed into RCAs in other buildings on four inspections since the ban on North respirators was enacted. This was the first time the CDH inspectors were challenged by building personnel.

A second issue was identified regarding the qualitative respirator fit test and training for the CDH personnel. The CDH inspectors have not been challenged on past inspections for their respirator fit test cards. Industrial Hygiene representatives stated that if the CDH personnel had their fit test cards from National Jewish, they could go to Building 452G for smoke tests and be allowed into the RCA, providing they had the correct respirators. Five of the six inspectors did not have their cards with them at the time. The CDH inspectors have agreed to get concurrent respirator fit test approval with RFP Industrial Hygiene.

The CDH inspectors inspected RCRA Units 90 1 and 90 11, which are located outside of the RCA. Unit 90 1 is contained in both the State RCRA Permit and in the Permit Modification for Mixed Residues. The CDH Permitting individual stated that the waste and mixed residues appeared to be stored in excess of the permitted capacity for the unit. There is a contradiction over capacity between the two permit documents. The CDH permitting individual stated that he would have to review the permit and modification, and discuss the requirements with his management prior to further comment.

Building 460. On May 20, 1993, a meeting was held to discuss with the CDH enforcement inspectors satellite assessments performed by DOE, RFO, Waste Operations Branch, RCRA Regulatory Programs, Waste Surveillance, and Building 460 personnel. The satellite assessments were performed on May 19, 1993.

The purpose for the assessment was to identify satellites that do not meet the regulatory requirements in the Colorado Hazardous Waste Regulations or the interpretive document #001.

The CDH enforcement inspectors requested to see the following satellites and their comments relative to each satellite are provided:

- 460-484, Room 151 is a satellite used by the Nondestructive Testing Group. CDH commented that the two processes that contribute hazardous waste to the satellite cannot be combined as one process and the satellite is not near the point of generation for one of the contributing processes.
- 460-490, Room 158 is a satellite used by the Assembly Group. CDH commented that the container and contents need to be removed from the satellite area because the operation that it supports is inactive, and the satellite has received waste from a satellite that was removed from service. Transferring waste from one satellite to another is not permitted.
- 460-1475, Room 158A is a satellite used by the Assembly Group. CDH commented that the container and contents need to be removed from the satellite area because the operation that it supports is inactive. Additionally, this satellite and 460-490 support the same process, by having two 55 gallon satellites the 55 gallon restriction could potentially be violated if the combined volume of the two satellites exceeds 55 gallons.

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- 460-478, Room 144 is a satellite used by the Sheetmetal Group CDH commented that the enforcement inspectors questioned the characterization of wastes contaminated with graphalloy and red lead as hazardous, and that the characterization be re-evaluated
 - 460-480, Room 141A is a satellite used by Maintenance and various other groups in Building 460 CDH commented that the satellite is accumulating hazardous waste from more than one process, and must only take hazardous waste from one process and not multiple processes
 - 460-498, Room 141A is a satellite used by the Electrical Maintenance Group CDH commented that the satellite is not at the base location for the Electrical Maintenance Group which is in Room 143A, and must be located in that location

CDH inspectors reiterated their comments mentioned above and requested by June 1, 1993, dates for which corrective actions will take place for correcting satellites in Bldgs 460 and 559 CDH also expressed a concern that the waste contained in inactive equipment is not being removed within 90 days after the equipment is shutdown Her statement was not aimed specifically toward equipment in Building 460, but equipment plantwide

Building 447. On May 27, 1993, the CDH enforcement inspectors performed a RCRA inspection of Building 447 During the inspection, CDH inspectors showed interest in the "uranium chip roaster," and requested that they be present when a scheduled access by building personnel is performed in the future CDH will have photographs taken of the chip roaster at that time. Room 407 contains the "Electro-Chemical Machine", attached to the machine is a tank that presently contains a white residue that is suspected to have a high concentration of chrome. CDH inspectors stated that equipment that is out-of-service must have the waste removed from it.

The CDH inspectors noted that inspections of tanks and associated ancillary equipment need to be performed by one responsible group The Stationary Operating Engineers perform the tank inspections daily in Building 444/447 and tank inspections in Building 460 on the weekends In addition, building management periodically perform a supplement inspection of the tanks

7. DOE ENVIRONMENTAL OVERSIGHT

7.1 Summary: There are two organizations within DOE, RFO that routinely conduct surveillances/evaluations on environmental oversight One is the Waste Programs Division (WPD) and the other is the Performance Assessment and Quality Assurance Office (PAQAO) RFO, WPD conducts environmental oversight surveillances based upon RCRA, TSCA, Colorado Hazardous Waste regulations, SDWA, CWA, CAA, and Conduct of Operations for waste facilities under DOE Order 5480 19 RFO, PAQAO conducts evaluations on environmental activities, in addition to other activities, emphasizing quality and performance Evaluations are audits or assessments Surveillances are more specific examinations of a particular item

RFO.WPD

RFO,WPD conducted a surveillance on EG&G's Corrective Action Program See Section 2 2 for details

RFO.PAQAO

RFO, PAQAO conducted one evaluation during the reporting period The evaluation was of the Tank Management Program RFP, PAQAO found six deficiencies during the evaluation The main deficiencies are

- tank management procedures do not reflect necessary operations, and
- lack of an established QA plan

As of June 4, 1993, EG&G had not received a report on the evaluation

7 2 Status RFO, WOB has 3 surveillances planned for the next reporting period The scheduled surveillances will be of Building 774, the 776 area drums, and a surveillance of the Chemical Control System RFO, WOB surveillances previously reported as planned for the SARF and Conduct of Operations in Building 774 were not conducted and have not been rescheduled

RFO, PAQAO has an evaluation, involving surface water sampling, planned for the next reporting period See Section 2 3 for a discussion about the future of this section

8. RCRA WASTE CONTINGENCY PLAN IMPLEMENTATIONS

The RCRA Contingency Plan has been implemented five times during this calendar year, the most recent implementation occurring on April 26, 1993 The implementation was due to a release of approximately 10 gallons of potentially contaminated ground water originating from a test well under construction as part of the base line risk assessment in OU 2 During drilling operations, a casing was inserted into a bedrock monitoring well to prevent contamination of the under lying bedrock by potentially contaminated ground water The insertion of the casing forced the water out of the hole and onto the ground The material wetted an area approximately 2 feet by 8 feet Steps were immediately taken to recover the released material A desiccant "Aqua-Set", was applied to the area to prevent the spread of the material The area was cleaned up to the extent that dry dirt was uncovered The material was containerized and is being managed as investigation derived material, pending laboratory analysis The containers are being managed within OU 2 and the procedure for inserting sleeve casings in wells has been revised to include a method of capturing any water that may be displaced by similar operations

The other four implementations include one on February 16, 1993 where a Building 371 tank spill was not cleaned up within the requisite 24 hours, a March 9, 1993 release of 50 gallons of contaminated surface water collected from Walnut Creek as part of a treatability study for OU 2, a March 18, 1993 release of 2 to 4 quarts of sulfuric acid to an asphalt surface in Building 130

Lay Down Yard, and a March 22, 1993 release of one gallon of contaminated waste water onto an asphalt surface near Building 559

All of these incidents have been tasked for corrective action and those tasks submitted to PATS for tracking and trending

9. EG&G SELF-ASSESSMENTS

BUILDING SPECIFIC, RCRA and TSCA (PCB) TASKS

9.1 Summary SAA's Assessment division conducted 16 surveillances during the reporting period. The surveillances were of bldgs 371, 374, 460, 559, 771, 776, 777, 881, and 952. Some buildings were subject to more than one surveillance during the period. Following is a summary of the RCRA-related items found during the surveillances:

Records	47	findings
Area	23	
Labels	14	
Training	1	
Tanks	5	
No findings	20	

The "no findings" category means that the assessment group was looking for problems within specific areas and did not find any non-compliances.

SAA's Assessment division conducted no TSCA PCB-related surveillances at RFP during the reporting period. According to PATS, Oxnard has no RCRA or TSCA PCB-related tasks open this reporting period. See Section 2.3 for a discussion of the future of this section.

10 MISCELLANEOUS

10.1 Miscellaneous Commitments Miscellaneous commitments are reported in Table 10 of this Report. This category is used to report data that is relatively insignificant in numbers only, and does not warrant a separate section at this time.

10.2 Training Performance Based Training (PBT) performs initial assessments to determine the effectiveness of varied training programs and for the development and revision of environmental courses. An example of each recently completed are as follows:

A functional area analysis for the RCRA process was analyzed by the Environmental and Quality Training group in concert with the RCRA Training Officer for the Process Management Team. The scope of this analysis was to identify all the basic functional area responsibilities for RCRA qualified personnel plantwide. This analysis will be the baseline for future detailed Job Task Analyses further defining the skills and levels of knowledge needed by plant waste generators through supervisors of concerns controlled by RCRA.

The development and implementation of the Line Control Safety Monitor Workshop is the training program that supports the Line Control Accident Prevention Plan. This workshop will help the worker promote excellence in safety and health by placing accountability and responsibility on line management and themselves. Some of the areas covered in this workshop are Safety Monitor Responsibilities, OSHA standards from 29 CFR 1910.120, Hazard Identification Techniques, Methods to Conduct Safety Inspections, and Accident Investigation Techniques.

Following is a table listing environmental training, the number of employees that have taken each course during this reporting period and year-to-date.

COURSE NAME	COURSE #	PRIMARY DRIVER	#STUDENTS 4/17 - 5/16	#STUDENTS FYTD
40 Hour Haz Wst Ops	018-691-03	29CFR 1910.120	26	225
24 Hour Haz Wst Ops	018-691-02	29CFR 1910.120	16	190
8 Hour Haz Wst Ops Mgmt	018-691-01	29CFR 1910.120	0	31
8 Hour Haz Wst Ops Refr	018-691-05	29CFR 1910.120	303	1456
Responder Awareness	062-472-01	29CFR 1910.120	28	50
Responder Operations	062-471-01	29CFR 1910.120	30	56
Resp Awareness Refr	019-471-01	29CFR 1910.120	0	8
Responder Ops Refr	019-472-01	29CFR 1910.120	0	10
Incident Command	021-370-01	29CFR 1910.120	8	30
Incident Command Refr	019-370-01	29CFR 1910.120	0	10
Responder Technician	019-474-01	29CFR 1910.120	0	0
SCBA	019-170-01	29CFR 1910.134	33	220
SCBA Refresher	019-171-01	29CFR 1910.134	0	0
"Haz Com Workshop, Mgrs"	090-754-01	29CFR 1910.1200	12	69
Lab Chem Hygiene Wkshop	031-183-01	29CFR 1910.1450	0	0
Waste Generator - PA	067-285-01	40CFR 262/264/265	167	889
Waste Generator-NonPA	067-285-02	40CFR 262/264/265	0	326

COURSE NAME	COURSE #	DRIVER	#STUDENTS 4/17 - 5/15	#STUDENTS FYTD
Waste Generator-NonRad	067-575-01	40CFR 272/264/265	440	1113
WSRIC	125-574-01	40CFR 262/264/265	0	0
RCRA Custodian	018-863-01	40CFR Part 264/265	70	591
RCRA Tank Custodian	016-863-01	40CFR Part 264/265	23	390
Confined Space Entry	068-741-01	29CFR 1910 146	111	1071
TSCA	016-936-01	40CFR	24	227
Asbestos Awareness	056-352-01	AHERA-40CFR	95	241
Line Control Program	019-974-01	DOE 5480 10	30	136
Safety Monitor	TBD	DOE 5480 10	0	0
Environmental Laws & Regs	016-100-01		0	0
		TOTAL	1406	7339

10.3 Waste Drums: Drums containing hazardous waste are tracked in the Waste Environmental Management System (WEMS) where expirations for drums stored beyond the 90-day time-frame can be readily identified. WEMS tracks all drums on plantsite, including empty drums.

According to the WEMS report for this period, there are no waste drums exceeding the 90-day storage requirements.

10.4 Operations Facilities Operating in Noncompliance: In a January 20, 1993 memorandum (WMED DG 10688) from DOE, RFO to EG&G, a request to list and justify continued operation of equipment in RCRA noncompliance with secondary containment requirements was made. The initial report was to have been submitted to RFO no later than February 1, 1993, and subsequent monthly updates of that information is to be reported in this report. To that end, the following information has been submitted for inclusion:

The following equipment or systems continue to operate in non-compliance with RCRA secondary containment requirements. Justification for continued operation of each of these systems was provided to RFO in correspondence (93-RF-1332, 93-RF-1335):

- Building 707 Process Waste Drain Line
- Buildings 444/447 Main Process Waste Line
- Building 374 Liquid Waste Processing Area

- Tank 231A, southeast of Building 374, storage of low-level waste feed solutions to Building 374 and Building 774 Liquid Waste Processing Area
- Building 771 Process Waste Lines
- Buildings 776/777 Process Waste Transfer Line
- Central Sump Discharge Line to Solar Pond 207B north
- Solar Pond waste transfer line through Buildings 771, 774, 776 and 778.

Compensatory measures, such as conducting daily visual inspections to detect leaks or performing daily verification of line integrity by hand-starting pumps and verifying normal flow, are in place as an interim action for these systems while they are in noncompliance and until corrective actions are implemented

The following information has been submitted as of May 15, 1993 for inclusion as a status update regarding equipment or systems, reported last month, which were operating or which continue to operate

For the Building 779 press waste line, a sample of the waste water was taken on April 26, 1993, in order to perform an analysis to confirm its content as determined by process knowledge. The schedule for receiving a completed analysis is unknown, however, it is currently estimated that the analysis will be received by August 1, 1993

For the Building 444 main process waste line, process waste is being generated from Room 212A. This line performs Toxic Chemical Leaching Procedure (TCLP) testing in support of FFCA II. This portion of the line, which carries liquids to the waste tank, is the only hazardous waste line currently operating in Building 444. This portion of the line has been repaired by replacing threaded clean-out plugs with glued caps.

For Tank 231A, planning has been completed for work to be performed on the overfill prevention control. Logistics has issued the purchase requisitions for materials. T1024533 is tracked in MAC #414. Schedule on MAC has material quotes completed by June 8, 1993, and installation targeted by June 16, 1993.

There are no reported changes in status for the other hazardous waste systems.

**Environmental Deficiencies Summary Tables
which are presented to the
Environmental Compliance Task Force Weekly**

Each week the following tables are presented to the Environmental Compliance Task Force (Task Force). The tables are updated weekly, but the format of each table is the same. Until the tables previously included in this report are produced electronically, the Task Force tables will be included in this report.

Each number on the tables represents one action plan for one environmental deficiency. Currently, there is not necessarily a one-to-one relationship in PATS, i.e., more than one environmental deficiency can be addressed in one action plan. However, the majority of action plans within PATS address one environmental deficiency. This issue is pointed out because the true number of environmental deficiencies may actually be higher than the table numbers represent.

The numbers in the tables do not include past action plans which addressed environmental deficiencies that have been reopened because DOE felt the action taken was inadequate or because the action plan was reopened by EG&G during the verification process.

Table 1 represents the original 253 deficiencies which were identified as of November 9, 1992. The table shows the total number of confirmed deficiencies, the total number of deficiencies correct (i.e., the number of action plans completed and verified), and the total number of deficiencies (i.e., action plans) remaining to be corrected.

Table 2 represents the cumulative environmental deficiencies identified at RFP through May 25, 1993. This includes the numbers from Table 1 and deficiencies which have been re-categorized as environmental deficiencies in PATS or new environmental deficiencies identified since November 9, 1992.

Table 3 represents the sources of the deficiencies which have been re-categorized as environmental deficiencies in PATS or new environmental deficiencies identified since 11/9/92. This table does not include additional sources in PATS which track environmental deficiencies, e.g., EG&G-surface water division, Colorado Department of Health inspections, external assessments, or regulatory commitments.

Table 4 represents the regulatory environmental deficiency status in a graphic format. It represents the number of deficiencies identified, the number of deficiencies corrected, and the number of corrective actions behind schedule through May 25, 1993. Corrective actions behind schedule means that at the current rate of progress, the corrective action will not be completed by its due date.

Table 5 represents the environmental deficiencies by area.

Table 6 represents the environmental deficiencies by requirement.

Table 7 represents the environmental deficiencies sorted by AGM.

10

***26 plans are referenced to existing plans**

5/25/93

Cumulative ENVIRONMENTAL DEFICIENCIES Deficiency Summary

253	Potential environmental deficiencies identified as of 11/9/92
	SOURCE: H. P. Mann ltr., 92-RF-13195, to R. M. Nelson, Environmental Deficiencies - HPM-074-92, November 9, 1992
-69	Items removed as potential deficiencies identified as of 1/5/93
	SOURCE: 1) G. L. Potter ltr., 92-RF-14705, J. K. Hartman, Regulatory Compliance Report - GLP-212-92, December 21, 1992 2) D. S. Tallman ltr., DST-001-93 A. L. Schubert, January 5, 1993
184	TOTAL CONFIRMED ENVIRONMENTAL DEFICIENCIES
+961	Deficiencies re-categorized as Environmental Deficiencies in the Plant Action Tracking after 11/9/92 (see "Deficiencies Added" for details concerning sources of these deficiencies)
1145	TOTAL DEFICIENCIES IDENTIFIED as of 5/25/93
-836	Environmental deficiencies corrected as of 5/25/93
309	TOTAL ENVIRONMENTAL DEFICIENCIES REMAINING FOR CORRECTION
Of the 309 deficiencies:	
	Correction in Process 239* Plans due 16
	Overdue 27 Tasks complete/
	Hold 1 final paperwork due 25
	Closed 1 309
*47 referenced to other plans	

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ENVIRONMENTAL DEFICIENCIES

Added After 11/9/92

Source	Number Environmental Deficiencies
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Environmental Deficiency #38 added 7 plans	
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Environmental Deficiency #168 added 1 plan	8
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Tank Assessments	100
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DOE Waste Surveillances	35
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July 1989 Environmental Assessment Study (EAS) Finding	1
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EG&G Waste Surveillances	796
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Self-Assessments	11
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RCRA Contingency Plan	1
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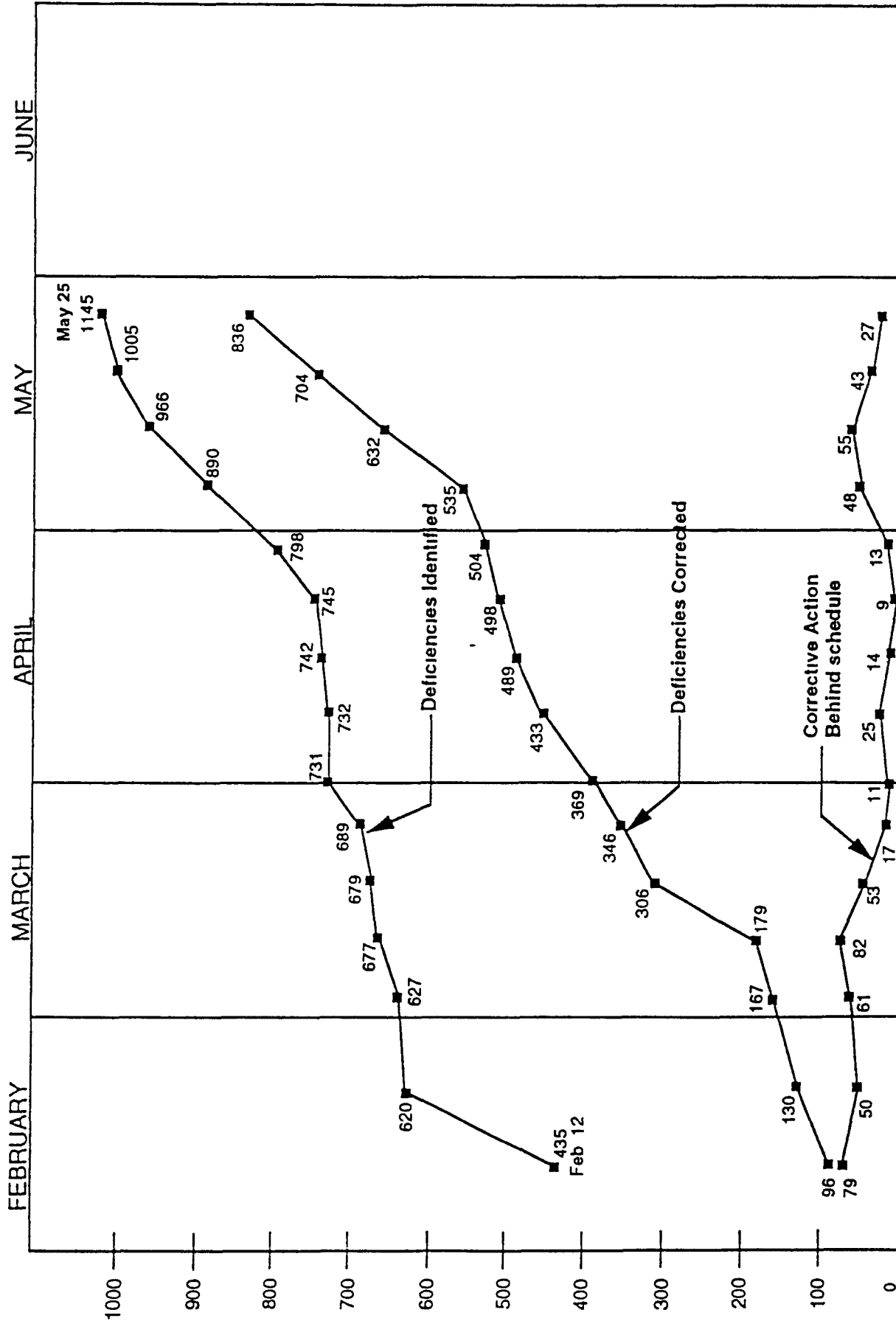
DOE Surveillance (Non-Waste)	4
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Miscellaneous	5
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Environmental Deficiencies Added After 11/9/92	961
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1993



ENVIRONMENTAL DEFICIENCIES

Area Deficiencies

Area	Total	Complete	Pending	Comments
Analytical Operations	86	71	15	
Plant Services	10	6	4	
Facility Operations	70	39	31	
Liquid Waste Treatment	136	125	11	
Operations 371, 771	205	148	57	
Operations 400	140	104	36	
Operations 800	96	71	25	
Plutonium Fabrication	60	44	16	
Regulated & Sanitary Waste	19	6	13	
Solid Waste Treatment	100	67	33	
Waste Assay & Shipping	25	23	2	
Waste Solidification	3	0	3	
Plant-wide	195	132	63	
TOTAL	1145	836	309	

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Requirement Deficiencies

Requirement	Total	Complete	Pending	Comments
CAA	21	19	2	
CERCLA/SARA	7	4	3	
EPCRA/SARA III	0	0	0	
CWA	4	2	2	
FIFRA				
NEPA				
SDWA	39	24	15	
SWDA/RCRA/HSWA	926	714	212	
TSCA	41	20	21	
OTHER	107	53	54	
TOTAL	1145	836	309	

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ENVIRONMENTAL DEFICIENCIES

Sorted By AGM

		Total	Corrected	Open
R. L. Benedetti	Environmental Restoration	22	15	7
T. G. Hedahl	Environmental & Waste Management	354	267	87
W. A. Kirby	Facility Management & Operations	712	519	193
R. D. Copp	Transition Management	4	3	1
J. H. Riley	Safety, Safeguards, & Security	5	1	4
H. S. Berman	Engineering & Technology	9	8	1
D. W. Ferrera	Maintenance & Plant Support	30	15	15
	J. A. Jones Construction	1	0	1
	Unassigned Org.	8	8	0
		1145	836	309

Revised 5/25/93